

Nebraská's Capital City

July 15, 2003

Mayor Seng and City Council City of Lincoln City County Building Lincoln, NE

Mayor Seng and Members of the City Council:

An investigation has been made regarding the application of FB Northstar LLC, d.b.a. Fast Break, 5700 North 33rd Street requesting a class D liquor license.

Fast Break will be a convenience store, which has requested alcohol sales.

Fast Break has requested that Peggy Roeder be approved as the manager of the liquor license.

Background information on the applicant is as follows:

Peggy Roeder was born in Hastings, Nebraska. She attended Palmyra High School graduating in 1964.

Peggy Roeder employment history is as follows:

2002 - Present

Manager, Salem Oil

Lincoln, NE.

1975 - 2001

Manager, Waverly Coop

Waverly, NE.

Stockholder information is included for your review.

If this application is approved, it should be with the understanding that it conforms to all the rules and regulations of Lincoln, Lancaster County and the State of Nebraska.



Theklus





Liquor License Investigation
Business (DBA) FAST BREAK
Manager Owner Other
Name: Peggy RoecOok
US Citizen? Yes No
Has applicant ever been cited for liquor law violations? No Yes Explain
Does applicant have an interest in another liquor license No Yes Explain
Is spouse qualified to hold a license? Yes No N/A
How is applicant if not an owner to be paid? Salary Hourly
How many hours will applicant be at the establishment? 40 +
Any other employment No Yes, explain
Any previous experience with a liquor license? Yes No
Any criminal convictions? No Yes Comments
Is applicant a property owner in Lincoln? Yes No
Is applicant involved in any civil litigation? (No) Yes Comments
(i) Photo (i) Records Check (ii) References
Comments

STATE OF NEBRASKA

PH: 7-28-03 (B) 1:30PM



Governor

OFFY CLEAR & Garage

'03 JUL 8 ANT 10 08

CITY OF LINCOLN NEBRASKA A3-075824

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NEBRASKA LIQUOR CONTROL COMMISSION
Forrest D. Chapman

Executive Director 301 Centennial Mall South, 5th Floor P.O. Box 95046 Lincoln, Nebraska 68509-5046 Phone (402) 471-2571 Fax (402) 471-2814

TRS USER 800 833-7352 (TTY) web address: http://www.nol.org/home/NLCC/

July 2, 2003

Office of the City Clerk 555 So 10th Street Suite 103 Lincoln NE 68508 FB Northstar LLC dba Fast Break 5700 No 33rd Class d.

ł

Dear Local Governing Body:

Attached is the form to be used on all retail liquor license applications. Local clerks must collect proper license fees and occupation tax per ordinance, if any, before delivering the license at time of issuance.

TWO KEY TIME FRAMES TO KEEP IN MIND ARE:

1) You have 45 days to conduct a hearing after the date of receipt of the notice from this Commission (§53-134). You may choose **NOT** to make a recommendation of approval or denial to our Commission.

PER §53-133, THE LIQUOR CONTROL COMMISSION SHALL SET FOR HEARING ANY APPLICATION WHEREIN:

- 1) There is a recommendation of denial from the local governing body.
- 2) A citizens protest; or
- 3) Statutory problems that the Commission discovers.

PLEASE NOTE...A LICENSEE MUST BE "PROPERLY" LICENSED IN ORDER TO PURCHASE FROM WHOLESALERS; AND, A LICENSE IS EFFECTIVE:

- 1) Upon payment of the license fees;
- 2) Physical possession of the license;
- 3) Effective date on the license.

Sincerely,

NEBRASKA LIQUOR CONTROL COMMISSION

king Mossinan

Mary Messman Licensing Division

Enclosures

Rhonda R. Flower Commissioner

Bob Logsdon Chairman R.L. (Dick) Coyne Commissioner

An Equal Opportunity/Affirmative Action Employer

FORM 35-4001 REV. 12/99

APPLICATION FOR LICENSE

Nebraska Liquor Control Commission PO Box 95046, 301 Centennial Mall South Lincoln, NE 68509-5046

20124 http://www.nol.org/home/NLCC/

Phone: (402) 471-2571 Fax: (402) 471-2814

PECENED

INSTRUCTIONS: Include: 1. Applicable fees payable to Liquor Control Commission 2. Copy of birth certificate or naturalization papers proving U.S. citizenship for each individual and spouse named on application (not required of corporations or spouse(s) who file an affidavit of no interest with application, Commission form 4178 3. Corporations must include copy of articles of incorporation as filed with the Secretary of States office in processing fees (are required of individuals, all partners and spouses. Corporate applicants must file for CEO/Manager & stockholders/member helding area 25% and 100 miles in the control of the control the state of Nebraska 4. Commission checklist, form 4251 5. Fingerprint cards and

JUN 23 2003

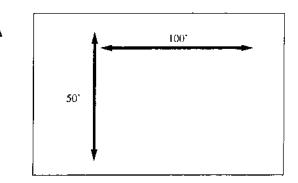
NE-BRASHALLILLUF

stockholders/member holding over 25% stock/interest. 6. All applications must be typewritten or printed clearly. 7. Submit in Triplicate

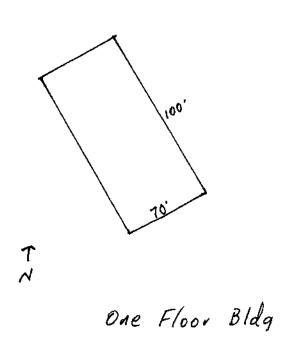
CLASS OF LICENSE FOR WHICH	ADE AND L	IST OF FEES FOR EAC	Н	
Class of License		Registration	License	Corporate
(Check applicable class)	•	Fee	Fees	Surety Bond
☐ A Beer, On Sale Only – Inside Corporate Limit		\$45.00	Collected at Local Level	exempt
☐ F Beer, On Sale Only – Outside Corporate Lin		\$45.00	Collected at Local Level	exempt
B Beer, Off Sale Only - Indicate Inside or Out		\$45.00	Collected at Local Level	exempt
J Wine, Beer, On Sale Only - Inside Corporat		\$45.00	Collected at Local Level	exempt
I Spirits, Wine, Beer, On Sale Only - Inside C		\$45.00	Collected at Local Level	exempt
X D Spirits, Wine, Beer, Off Sale Only – Inside (Corporate Limits	\$45.00	\$150.00	exempt
D1 Spirits, Wine, Beer, Off Sale only – within		¢45 AA	#150 AA	
extraterritorial zoning jurisdiction C Spirits, Wine, Beer On & Off Sale - Inside O	Comorata Limite	\$45.00 \$45.00	\$150.00 Collected at Local Level	exempt
M Bottle Club (Spirits, Wine, Beer, on Sale)	Corporate Limits	\$45.00	Collected at Local Level	exempt exempt
☐ H Nonprofit Corporation		\$45.00	Collected at Local Level	exempt
K Wine Only Off Sale	·-· -	\$45.00	Collected at Local Level	exempt
O. Boat		\$45.00	\$ 50.00	exempt
V Manufacturer of Beer, Wine & Distilled Spir	rits	\$45.00	Varies \$100 to \$1,000	\$10,000 min.
☐ X Wholesale Liquor		\$45.00	\$500.00	\$ 5,000 min.
□ W Wholesale Beer		\$45.00	\$250.00	\$ 5,000 min.
Y Farm Winery		\$45.00	\$250.00	\$ 1,000 min.
L Craft Brewery (Brew Pub)		\$45.00	\$250.00	\$ 1,000 min.
TYPE OF APPLICATION	CORPOR	ATE SURET	Y BOND INFORMATIO	N
Type of application being applied for (place appropriate number in box) 1= Individual License requires Form 1 to be attached. 2= Partnership License requires Form 2 to be attached. 3= Corporate License requires Form 3 and 4 and Manager Application be attached.	Start Date Month/Day		Bond Number	
SECTION A - LOCATION IN Trade Name (name of business)			ed by all applicants ber at premise to be license	d
Fast Break	Not Av	vailable		
1) Street Address of Proposed licensed premise	2) Mailing Add		pt of	
5700 North 33rd Street Is this located inside the city limits Circle (YES) NO	P.O.	Box 81	-	ļ
City County Zip Cod	e City		County Zi	p Code
Lincoln Lancaster 6850	4 Lincoln	.]	Lancaster	68501
				FORM 35-4010

DESCRIPTION AND DIAGRAM OF THE STRUCTURE TO BE LICENSED

In the space provided draw the area to be licensed. This should include storage areas, basement, sales areas and areas where consumption or sales of alcohol will take place. If only a portion of the building is to be covered by the license, you must still include dimensions (length x width) of the licensed area as well as the dimensions of the entire building in situations where only a portion of the entire bldg, is to be covered by the license. No blue prints will be accepted. Be sure to indicate the direction North and number of floors of the building.



Example: East portion approximately 50' x 100' of main floor of 3 story building plus basement approximately 30' x 50' at the East end.



SECTION B COLUMN SECTION B CONTRACTOR OF THE SECTION B.	क्षाकोटल <u>स्</u> रहास	OURED.
		Explanation/Comments
READ CAREFULLY. Answer completely and accurately.		
Has anyone who is a party to this application, or their spouse, ever been convicted of or plead guilty to any criminal charge. Criminal charge means any charge alleging a felony or misdemeanor or violation of a federal or state law; or a violation of a local law, ordinance or resolution. List the nature of the charge, where the charge occurred and the year and month of the conviction or plea. Also list any charges pending at the time of this application. If more than one party, please list charges by each individual's name.	~	0

	Yes	No.	Est planation (Comments)
2. Are you buying the business and/or assets of a licensee? If yes, submit a copy of the sales agreement with a listing of assets being acquired including liquor inventory (name brand and container size required).		No	
3. Are you filing a temporary agency agreement, Commission form 4231, whereby current licensee allows you to operate on their license? If yes, attach copy.		No	
4. Are you borrowing any money from any source to establish and/or operate the business? If yes, list the lender.	Yes		Security First
5. Will any person or entity other than licensee be entitled to a share of the profits of the establishment? If yes, explain.		No	
6. Will any of the furniture, fixtures and equipment to be used in this business be owned by others? If yes, list such items and the owner.		No	
7. Will any person(s) other than named in this application have any direct or indirect ownership or control of the business? If yes, explain?		No	
8. Are the premises to be licensed within 150 ft. of a church, school, hospital, home for the aged or indigent persons or for veterans, their wives, children, or within 300 ft. of a college or university campus? If yes, list the name of such institution and where it is located in relation to the premises. Per Sec. §53-177.		No	
9. Is anyone listed on this application a law enforcement officer? If yes, list the person, the law enforcement agency involved and the persons exact duties.		No	
10. List the primary bank and/or financial institution (branch if applicable) to be utilized by the business and the person(s) who will be authorized to write checks and/or make withdrawals on accounts at such institutions.	A. B.		curity First arles R. Salem
11. List all past and present liquor licenses held by any person named in this application. Include license holder name, location of license and license number. Also list reasons for termination of any licenses previously held.	3100	NW]	th Street #43562 12th St. #54995 n Dorn #51966
12. List the person who will be the on site supervisor of the business and the estimated number of hours per week such person or manager will be on the premises supervising operations.		ggy (Hour	C. Roeder
13. List the training and experience of the person listed in #12 above in connection with selling and/or serving alcohol products.	and	a ma	ly been licensed nager of local nce store
14. If the property for which this license is sought is owned, submit a copy of the deed, or proof of ownership, if leased submit a copy of the lease covering the entire license year. (Documents must show title or lease held interest in name of applicant as owner or lessee in the individual(s) or corporate name for which the application is being filed).	Se	e att	ached.
15. When do you intend to open for business?	8.	-01-0	3
			FORM 35-4010

NAME		FROM (YEAR)	TO (YEAR)	RESIDENCE (CITY, STATE)
Charles Robert Salem	2825 Stratford	1945	Present	Lincoln NE
Sherene Lee Salem	2825 Stratford	1945	Present	Lincoln, NE
Carolyn S. Otte	3003 South 31st	1983	Present	Lincoln, NE
Robert C. Otte	3003 South 31st	1983	Present	Lincoln, NE
<u></u>		 -	.1	·
			<u> </u>	

The undersigned applicant(s) hereby consent(s) to a background investigation and release of present & future records of every kind and description including police records, tax records (State and Federal), bank or lending institution records, and said applicant(s) and spouse(s) waive(s) any right or causes of action that said applicant(s) or spouse(s) may have against the Nebraska Liquor Control Commission, the Nebraska State Patrol, and any other individual disclosing or releasing said information. Any documents or records for the proposed business or for any partner or stockholder that are needed in furtherance of the application investigation or any other investigation shall be supplied immediately upon demand to the Nebraska Liquor Control Commission or the Nebraska State Patrol. The undersigned understand and acknowledge that any license issued, based on the information submitted in this application, is subject to cancellation if the information contained herein is incomplete and/or inaccurate.

Individual applicants agree to supervise in person the management and operation of the business and that they will operate the business authorized by the license for themselves and not as an agent for any other person or entity. Corporate applicants agree the approved manager will superintend in person the management and operation of the business. Partnership applicants agree one partner shall superintend the management and operation of the business. All applicants agree to operate the licensed business within all applicable laws, rules, regulations, and ordinances and to cooperate fully with any authorized agent of the Nebraska Liquor Control Commission.

Must be signed in the presence of a notary public. Must be signed by applicant and spouse; if a partnership, all partners and spouses must sign and corporation, all stockholders/members (holding more than 25% of the stock or interest), officers, directors and spouses must sign. Full names only, initials not acceptable.

sign here sign here	Carolyn S. Otto Chul Refuh	sig hei sig	n Me	ROTE	Jalem
sign here sign here		sig her sig	n e <u> </u>		
Subsc	fibed in my presence and sworn to before me this	914		JUNE	, 2003

In compliance with ADA, this application for license form is available in other formats for persons with disabilities. A ten day advance period is requested in writing to produce the alternate format.

GENERAL NOTARY - State of Nebraska

(MAL)

JUDY TRUPP

My Comm. Exp. Dec. 20, 2005

sign here

Notary Public Signature

Corporation/LLC Application for License - Form 3

Nebraska Liquor Control Commission

INSTRUCTIONS:

- 1) Application and application for manager must be typewritten and submitted in triplicate
- 2) Fingerprint cards (2 cards per person) must be submitted for: a) each stockholder owning over 25% of the stock, b) chief executive officer, c) proposed manager and d) all spouses
- 3) Information regarding spouses must be completed



City Lincoln	2825 Stratford Avenue	Nome Address (1)	Charles R. Salem	Name	INTHIS SECTION L	Robert R. Otte	Name of Registered Agent	Lincoln	City Cou	1234 North 14th Street	Corporate Street Address (1)	FB Northstar LLC	Name of Corporation That Will Hold License. Attach copy of Articles of Incorporation
State Zip Code 68501			President	Title	IN THIS SECTION LIST THE NAME OF THE CHIEF EXECUTIVE OFFICER	Peggy C. Roeder	Name of Proposed Manager	Lancaster	County State	P.O. Box 81006	Mailing address for receipt of Liquor Control Commission Mailings		icles of Incorporation
Home Telephone Number 402-435-0434	NE	State		Date of Birth Social Security Number	VE OFFICER	der	T	NE 68508	Zip Code	402-476-3333	Corporate Telephone Number		Total Number of Shares (if corporation)

Corporation/LLC Application for License - Form 3

				Spouse Name
				MAME
77.				Otte, Robert Roy
1/2 c/s	Secretary			NAME Otte, Carolyn Sue Carveth
				Spouse Name Salem, Sherene Lee Rash
1/2 043	Pres			NAME Salem, Charles Robert
				Spouse Name
j				NAME SHAREHOLDERS OF FAST BREAK, INC.
				Spouse Name
				NAME No other LLC members have greater than 25% ownership.
				Spouse Name
40%	red Pres	Incorporated 8-27-01	Federal ID#	NAME Fast Break, Inc. by Charles R. Salem
Number of Shares/%	Tüle	Date of Birth	Social Security Number	Name of Officers. Directors. Members and Spouses. Give Last Name, First Name, Middle, Maiden, and any aliases
	USES	MBERS AND SPOUSES	RS, STOCKHOLDERS, ME	PRINCIPLE OFFICERS, DIRECTORS, STOCKHOLDERS, MEMBERS A

(If Necessary, Continue on Separate Sheet)

Corporation/LLC Application for License - Form 3 Nebraska Liquor Control Commission

A TOTAL TOTA	In Compliance with ADA, this form is available in other formats for persons with disabilities. A ten day advance period is requested in writing to produce the alternate format
By Church Carolina PRESIDENT: MEMBER Carolina & Otto	GENERAL NOTARY - State of Nebraska JUDY TRUPP Ny Comm. Bp. Dec. po. 2005: H. J.
	STATE OF Nebruska
	Please indicate below your corporate tax year with the IRS starting Date: <u>)</u> の
k/interest in that corporation/LLC. Any applicant who has a Corporation prations owning more than 25% stock and listing of the percentage of stock	f YES, LIST EACH STOCKHOLDER/MEMBER OWNING MORE THAN 25% stock/interest in that corporation/LLC. Any applicant who has a Corporation is a shareholder MUST file an organizational chart listing all shareholders and/or corporations owning more than 25% stock and listing of the percentage of stock with the corporation of the percentage of stock and listing of the percentage of stock and listing of the percentage of stock with the corporation of the percentage of stock and listing all shareholders and/or corporations owning more than 25% stock and listing of the percentage of o
	Name of Control Corporation
	s this Corporation/LLC controlled by another Corporation? YES *NO

Application for Corporate Manager

Must Be A Nebraska Resident Please submit in Triplicate

Return to:

Nebraska Liquor Control Commission, PO Box 95046

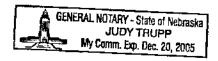
301 Centennial Mall So., Lincoln NE 68509

Phone: (402) 471-2571 Fax: (402) 471-2814 Web address: http://www.nol.org/home/NLCC/

	LIQUOR	LICE	NSE INFORM	1A	TION	هن	-3-4			
NAME OF LICENSED CORPORATION					CLAS	SS & Lic	ĖŅŠ	Ė NÜMI	BER	
FB NORTHSTAR LLC					1.	323				
TRADE NAME OF LICENSED PREMISE						JIJN.	2.5	<u> 5003</u>		
FAST BREAK	<u> </u>					CHART	ig Bergg	COLUMN MANAGO	92101/ 92101/	
STREET ADDRESS OF LICENSED PREMISE	CITY			CC	DUNTY	CHIT	KN.	OG T	ZIP CODE	
5700 North 33rd Street	Lincol	.n	i		Lancas	ter			68504	
On behalf of the corporation, I designate this indivi-	dual as corpor	ate ma	nager.	_						_
Signature of Corporate Presider										
APPLICAN	I INFOR	MAT	ION (MUST	ľ	BE 21 OR	OVE	₹)			
NAME (LAST, FIRST, MIDDLE, MAIDEN)	SEX (F) M	sc	CIAL SECURIT	DATE	OF E	BIRTH	PLACE OF BIF	RTH		
Roeder, Peggy Charlene Wood							ļ	Hastings,	NE	
HOME STREET ADDRESS	CITY		٦	COUNTY	<u>. </u>		STATE	ZIP CODE	-	
8331 Carriage Hill Court	ncoln	ln Lancaster NE				68512				
HOME TELEPHONE NUMBER (402 488-0343	BUSINESS ()	TELEI	HONE NUMBER DRIVERS LICENSE NUMBER & STA-					ATE		
SPOUSE'S INF	ORMATI	ON (IF NOT MA	۱E	RIEDIN	DICA'	ΓE)			
FULL NAME (LAST, FIRST, MIDDLE, MAIDEN)			SOCIAL SEC	UF	UTY NUMB	ER	DR	IVERS I.	ICENSE NUMB	FR
None			:					STATE		
DATE OF BIRTH:			PLACE OF B	IR.	г н					_
1. READ CAREFULLY. Answer completely Has anyone who is a party to this application, or charge means any charge alleging a felony or m or resolution. List the nature of the charge, whe charges pending at the time of this application. Yes No	their spouse isdemeanor to the charge	e. ever	on of a federal	or	state law, o	r a viola	tion	of a loca	il law, ordinand	

give license n	и your spous umber and d	se ever made appl: late	ication for any liqu	or lic	ense or manage	er for any liquor	license?	IF YES,	for what premise
E YES			Bennett, N	E	#B39806	January,	1998	÷	

3. Have yo □YES	u or your sp	oouse ever made a compro	mise settle	ment for	violatio	of such laws?		<u> </u>	
4. Do you. Nebraska I	as a manag Liquor Con □NO	trol Act (§53-131.01)	ons requir	ed by any	person	entitled to hold a Nebraska I	Liquor Lic	cense?	
5. Have you	u filed fing		R FEES (i	f check, n	nake ou	to the NE State Patrol), wit	h this app	olication?	
	RE:	SIDENCES FOR THE P	AST 10 Y	EARS, A	PPLIC.	ANT AND SPOUSE MUST	COMPI	LETE	
APPLICANT	T: CITY & ST.	ATE	FROM	EAR TO	SPOUS	E: CITY & STATE		YEAF FROM	R TO
	oln, NE ett, NE	<u>, </u>	1989 1968	Prese 1989		N/A			
YE. FROM	AR TO	EMPI NAME OF EMPLOYER	OYERS -	LIST L	ast ty	VO EMPLOYERS NAME OF SUPERVISOR	TEL	EPHONE NUMB	ER
12-98	4-01	Nebraska Retai	ll Vent	ures		Judy Gross	4(000
1987	12-98	Waverly Coop	AP DIL	empre re		Judy Gross	4(02-782-89	000
STATE OF COUNTY (The above indivapplication, that the applicant(s) The undersigned Federal), and ba Control Commis affidavit of non-	NEBRAS: OF LANC vidual(s), being said applications shall be deemed applicant here ink or lending it is sion and any oparticipation in dunderstand and understand and understand and applicant of the said and any oparticipation in dunderstand and dunderstand and dunderstand and dunderstand and dunderstand any open dunderstand and dunderstand any open dunderstand and dunderstand any open d	SS ASTER g first duly sworn upon oath, depoin has been read and that the conte d guilty of perjury and subject to purply consents to an investigation of institution records, and said application individual disclosing or releasing be attached.	oses and states nts thereof and benalties provi his/her backgr nt and spouse sing said inform	s that the undid all statement ided by law. round including waive any right including to the	dersigned ants contain (Sec. §53 ing all recognis or cau Nebraska	is the applicant and/or spouse of apped therein are true. If any false states 131.01) Nebraska Liquor Control A ords of every kind and description includes of action that said applicant or spouse of action this application, is subject to can	olicant who rement is made to the land to	makes the above are in any part of this erecords, tax record ve against the Nebruterest directly or in	nd foregoing application. is (State and aska Liquor ndirectly, an
	Signate	Lean_							
Subscribed in m	_	sworn to before me this 6-4h			Subscrib day of	Signature of Spouse ed in my presence and sworn to befor			
	A-Cly Nory	Signature & Seal				Notary Si	gnature & S	 Geal	



NEBRASKA LIQUOR CONTROL COMMISSION AFFIDAVIT OF NON PARTICIPATION

The undersigned individual acknowledges that he/she will have no interest, directly or indirectly, in the operation or profit of the business, as prescribed in Section §53-125(13) of the Liquor Control Act. Such individual shall not tend bar, make sales, serve patrons, stock shelves, write checks, sign invoices, represent themselves as owner or in any way participate in the day to day operations in any capacity. Undersigned will also be waived of filing fingerprint cards, however, has disclosed any violation(s) on application.

violation(s) on application.	
Sherono I Salam	JUN 23 2003
Signature of Spouse	CONTRO! CONNINGEN.
SUBSCRIBED in my presence and s	7.4
GENERAL NOTARY - State of Nebraska JUDY TRUPP My Comm. Exp. Dec. 20, 2005	Signature of Notary Public
	e is responsible for compliance with the conditions set I, the Commission may cancel or revoke the license.
Signature of Licensee/Applicant	Print Name of Licensee/Applicant
SUBSCRIBED in my presence and s	worn to before me this day of
	Signature of Notary Public

SIGNATURE PAGE OF DONALD LINSCOTT TO THE OPERATING AGREEMENT

Chuck: In add to Fast Break, In there are the other Members of the LLC. (FI Norths	Donald Linscott Member Address: 300 North 44th
\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \) SS.) nt was acknowledged before me this \(\bigs\) day of 02, by Donald Linscott.
	Notary Public
RRO/bc	ONTONIONALISTUS

♦ Op Agreement
♦ FB Northstar

♦Ver: 11/21/2002

The state of the second second

SIGNATURE PAGE OF ROYCE MUELLER, M.D. TO THE OPERATING AGREEMENT

	Royce Mueller, M.D.
	Address: 6730 Ann's C† Lincoln, NE 685/6 Home Telephone: 402-421-1994 Work Telephone: 488-5600 Cellular Telephone: 770-6680 E-Mail Address: royce mueller @ gol.com Social Security Number: 506-64-8144
STATE OF NEBRASKA) SS. COUNTY OF LANCASTER) The foregoing instrument was accompany, 2002, by Royce	cknowledged before me this <u>\lambda</u> day of Mueller, M.D.
GENERAL NOTARY-State of Nichtaska ROBERT H. OTTE ROBERT Nov. 24, 2004 My Comm. Exp. Nov. 24, 2004	Notary Public
	JUN 23 2003 CONTROL COMMISSION

♦ Op Agreement ♦ FB Northstar ♦ Ver: 11/21/2002

SIGNATURE PAGE OF ALAN R. BERG, M.D. TO THE OPERATING AGREEMENT

	Alan R. Berg, M.D.
	Address: SIOO Trotter Cr. Lincoln NE 68516 Home Telephone: 402 420 1763 Work Telephone: 402 484 4900 Cellular Telephone: 402 484 4900 E-Mail Address: ABOCA GOLF B abl. Co. Social Security Number: 502-64-4165
2002, by Alan)	acknowledged before me this day of R. Berg, M.D.
GENERAL NOTARY-State of Nebraska ROBERT R. OTTE My Comm. Exp. Nov. 24, 2004	Notary Public
	Man

♦ Op Agreement ♦ FB Northstar ♦ Ver: 11/21/2002

SIGNATURE PAGE OF STEPHEN W. CARVETH, M.D. TO THE OPERATING AGREEMENT

	Stephen W. Carveth, M.D.
	Address: lezes old change Rd
	Home Telephone: 423-1768 Work Telephone: Cellular Telephone: E-Mail Address: 5 Social Security Number:
STATE OF NEBRASKA) SS. COUNTY OF LANCASTER) The foregoing instrument was ack	cnowledged before me this \(\) day of
GENERAL NOTARY-State of Robission ROBERT R. OTTE My Comm. Exp. Nov. 24, 2004	Notary Public
	JUN 23 2003
	CONTROL COMMIRGON

♦ Op Agreement ♦ FB Northstar ♦ Ver: 11/21/2002

The state of the second of the